400423

SEC 1972 (6-02) Potential persons who are to respond to the collection this form are not required to respond unless the valid OMB control number.



07065032

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
MB Number: 3235-0076
xpires: May 31, 2005
stimated average burden
ours per response 1

SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							

Name of Offering ([] check if this is an amendment and name has changed, and indica Angel Field Office Center, Ltd.	te change.)
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Security of Filing: [X] New Filing [] Amendment	etion 4(6) [] ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	PROCESSE
Name of Issuer ([] check if this is an amendment and name has changed, and indicat Angel Field Office Center, Ltd.	e change.) MAY 2 5 2007
Address of Executive Offices (Number and Street, City, State, Zip Code) (Including Area Code) 10005 Technology Blvd. W, Suite 151, Dallas, TX 75220 (214) 90	Telephone NuFIMANCIAL
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (Including Area Code) (if different from Executive Offices) same	Telephone Number
Brief Description of Business The partnership has been organized to cons	struct on 12.3 acres

Brief Description of Business The partnership has been organized to construct on 12.3 acres a three building complex of approximately 166,000 square feet with structured parking and integrated into a parks plan along Watters Branch Creek.

Type of Business Organiz	ation
[] corporation	[x] limited partnership, already formed [] other (please specify):
[] business trust	[] limited partnership, to be formed
	Month Year
Actual or Estimated Date	of Incorporation or Organization: [0]4] [0]7] [x] Actual [] Estimated
Jurisdiction of Incorporati	on or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [T][X]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[x] Promoter [Beneficial Owner	[] Executive Officer	[] Director [X]	General and/or Managing Partner
Full Name (Last nam Emerson Farm Co		•			
Business or Resident 10005 Technology	•		•	ode)	
Check Box(es) that Apply:	[x]Promoter[]	Beneficial Owner	[x] Executive Officer	[]Director[General and/or Managing Partner
Full Name (Last nam Budge, Arth		1)			, , , , , , , , , , , , , , , , , , ,
Business or Residen 4925 Green	•		, City, State, Zip Co gy Square, Dallas	-	
Check Box(es) that Apply:	[x] Promoter [] Beneficial Owner	[x] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam Williams, Philip L		1)		-	, , , , , , , , , , , , , , , , , , ,
Business or Resident 10005 Technology				ode)	
Check Box(es) that Apply:	[X] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam Monier, Amy W.	e first, if individua	1)		, , , , , , , , , , , , , , , , , , ,	.`
Business or Residen 10005 Technology				ode)	
Check Box(es) that Apply:	[X] Promoter [] Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam	e first, if individua	1)		-	,
Business or Residen	ce Address (Num	ber and Street	, City, State, Zip Co	ode)	
Check Box(es) that	[] Promotor [1 Popoficio	[] Executive	[] Director []	Cararalandos

Apply	:				O	wner	C	Officer				inaging rtner
Full N	lame (La	ast nam	e first, if	individu	al)							
Busin	ess or F	lesidend	ce Addre	ess (Nur	nber and	d Street,	City, Sta	ate, Zip (Code)			
Check Apply	k Box(es	s) that	[] Pr	omoter		eneficial wner		xecutive Officer	. [] [Director	Ma	neral and/or inaging itner
Full N	lame (La	ast name	e first, if	individu	al)							
Busin	ess or F	lesidend	ce Addre	ess (Nur	nber and	l Street,	City, Sta	ate, Zip (Code)		<u> </u>	
		(Use bl	ank she	eet, or c	opy and	use ad	Iditional	copies	of this s	heet, as	neces	sary.)
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	s the iss		l, or doe	s the iss	suer inte	nd to se	ll, to nor	-accredi	ted inves	itors in th	nis	Yes No
0.14/1								•	under Ul			
						-		-		••••••	******	\$ <u>100,000</u> Yes No
3. Do	es the of	ffering p	ermit jo	int owne	rship of	a single	unit?	••••••	•••••			[x][]
directl conne perso the na	ly or indi ection wi n or age ame of th	rectly, a th sales int of a l ne broke	any com of secu proker o er or dea	mission rities in r dealer aler. If m	or simila the offer register ore thar	ar remur ring. If a ed with t I five (5)	neration to person to the SEC persons	for solicit to be liste and/or w to be lis	ation of ped is an a vith a stated are a	d or give purchase associate te or stat associate roker or o	ers in ed es, list ed	
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Name	of Asso	ciated I	Broker o	r Dealei	•							
States	s in Whi	ch Pers	on Liste	d Has S	olicited o	or Intend	ls to Soli	cit Purch	asers			
(Chec	ck "All	States"	or chea	ek indiv	z leubiy	tates)				[] Δ11	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	 [DC]	[FL]	ι [GA]	(HI)	[ID]
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full N	ame (La	st name	e first, if i	ndividua	al)							
Busin	ess or R	esidend	e Addre	ss (Num	nber and	Street, (City, Stat	e, Zip Co	ode)			
Name	of Asso	ciated E	Broker o	Dealer							· · · · · · · · · · · · · · · · · · ·	
States	in Whic	ch Perso	on Listed	l Has So	olicited o	r Intends	to Solic	it Purcha	sers			
(Chec	k "All	States"	or chec	k indiv	idual St	ates)	• • • • • • • • • • • • • • • • • • • •			[] All S	tates
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]		[NJ]	[MM]	[NY]		-	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	(TX)	[UT]			[WA]	[wv]	[WI]	[WY]	[PR]
Full N	ame (La	ıst name	e first, if	individua	al)							_
Busin	ess or R	esidend	e Addre	ss (Nun	nber and	Street, 0	City, Stat	e, Zip Co	ode)			
Name	of Asso	ciated E	Broker o	Dealer								
States	in Whic	ch Perso	on Listed	Has So	olicited o	r Intends	to Solic	it Purcha	sers			
(Chec	k "All	States"	or chec	k indiv	idual St	ates)	••••••			[] All S	tates
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]		[NV]	[NH]		[NM]		[NC]	-	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
		(Use bl	ank she	et, or c	opy and	use add	ditional (copies o	f this sh	eet, as r	necessai	ry.)
	C.	OFFER	ING PRI	CE, NU	MBER C	F INVE	STORS,	EXPENS	SES AND	USE O	F PROC	EEDS
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Aggregate

2. Enter the number of accredited and non-accredited investors who purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u>, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or zero."

	Number Investors	Dollar Amount of Purchases
Accredited Investors	0	\$0
Non-accredited Investors	0	\$ <u></u> 0
Total (for filings under Rule 504 only)	0	\$
		<u></u>

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dolla Sold	r Amount
Rule 505	0	\$	0
Regulation A	0	\$	0
Rule 504		\$	0
Total	0	\$	0

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[x]\$ <u> 0 </u>
Printing and Engraving Costs	[x]\$ <u>0</u>
Legal Fees	[x]\$ <u>0</u>
Accounting Fees	[x]\$ <u>0</u>
Engineering Fees	[x]\$ <u>0</u>
Sales Commissions (specify finders' fees separately)	[x]\$ <u>0</u>
Other Expenses (identify)	[x] \$ <u> 0 </u>
Total	[x]\$ <u>0</u>

\$ 15,000,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Payments to Officers, Directors, & Affiliates

Payments To Others

Salaries and fees	x] \$	250,000	[x] \$ 2	296,976
Purchase of real estate	[x] \$	0	[x] \$	0
Purchase, rental or leasing and installation of machinery and equipment	[x] \$	0	[x] \$	0
Construction or leasing of plant buildings and facilities	[x] \$	0	[x] \$ 10,000	0,000
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[x] \$	0	[x] \$	0
Repayment of indebtedness	[x] \$	0	[x] \$	0
Working capital	[x] \$	0	[x] \$ 3	87,737
Other (specify): (Design & Development \$3,840,287) (Taxes & Insurance \$75,000) (Legal Costs \$150,000)	[x]\$	0	[x] \$4,09	5,287
	[x] \$	0	[x] \$	0
Column Totals	[x] \$	250,000	[x] \$ 14	,750,000
Total Payments Listed (column totals added)	•	•	5,000,0	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

Issuer (Print or Type) Angel Field Office Center, Ltd.	Signature	Date 05/04/2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Emerson Farm Company General Partner, Ltd., Its General Partner By: Emerson Farm Company GP, L.L.C., Its General Partner By: Emerson Partners, Inc., Its Sole Member	-	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?				
See Appendix, Column 5, for state response.				

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Angel Field Office Center, Ltd.	Signature	Date 05/04/2007		
Name of Signer (Print or Type) Emerson Farm Company General Partner, Ltd., Its General Partner By: Emerson Farm Company GP, L.L.C., Its General Partner By: Emerson Partners, Inc., Its Sole Member	Title of Signer (Print or Type) Philip L. Williams, President			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2	2 3 4			5 Disqualification				
			Type of security				under State ULOE		
	Intend t	o sell	and aggregate					(if yes, attach	
	to non-acc		offering price		Type of investor and			explanation of	
	investors			amount purchased in State			waiver granted)		
	(Part B-I	tem 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E-I	tem 1)
		Number of Number of							
State	Yes	No	•	Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No
AL	163		<u> </u>	1114631013	Amount	investors	Alliouni	163	1,10
AK					<u> </u>		<u> </u>	<u> </u>	
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AZ	х		\$15,000,000 Limited Partnership	0	0	0	0		х
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MS	<u> </u>	<u> </u>	<u> </u>		1		 	<u>l</u>	
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WY							
PR							

http://www.sec.gov/divisions/corpfin/forms/formd.htm Last update: 06/06/2002